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James Epperson
Type or print name

James Epperson
Signature

January 7, 2004
Date

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF

DAVID J. CARINI

APPLICATION NO: 10/697,807

FILED: OCTOBER 30, 2003

FOR: N-CYCLOALKYLGLYCINES AS HIV PROTEASE INHIBITORS

Mail Stop DD
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

This paper is being filed within three months of the filing date of the application. Therefore, no fees are required. If a fee is deemed to be required, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 19-3880.

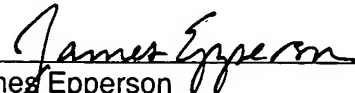
In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

Copies of these references are enclosed herewith.

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

Respectfully submitted,

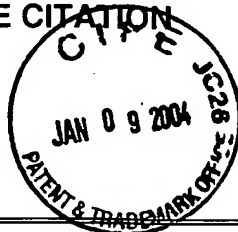
Bristol-Myers Squibb Company
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James Epperson
Agent for Applicant
Reg. No. 52,867

Date: 4/7/2004

FORM PTO-1449
(REV. 7-85)U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE**INFORMATION DISCLOSURE CITATION**

(Use several sheets if necessary)


 ATTY. DOCKET NO.
 PH-7425 NP
 APPLICATION NO.
 10/697,807
 APPLICANT
 DAVID J. CARINI
 FILING DATE
 OCTOBER 30, 2003

Group

U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA	5,756,533	5/26/98	D. P. Getman, et al			
	AB	5,776,971	7/7/98	D. P. Getman, et al			
	AC	6,046,190	4/4/00	M. L. Vazquez, et al			
	AD	6,143,788	11/7/00	D. P. Getman, et al			
	AE	6,150,556	11/21/00	D. P. Getman, et al			
	AF	6,156,768	12/5/00	M. L. Vazquez, et al			
	AG	6,391,919B1	5/21/02	R. F. Kaltenbach, et al			
	AH						
	AI						
	AJ						
	AK						
	AL						

FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	AM						<input type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

EXAMINER**DATE CONSIDERED**

*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.